



# New York State Department of Environmental Conservation Request for Approval of Wastewater Treatment Plant Operator Renewal Training



1. Training Course Title: \_\_\_\_\_

2. Dates of Training:        Start Date \_\_\_\_\_ End Date \_\_\_\_\_

3. The Purpose of this Training is:     Renewal Training     Precertification Training

4. Will this Training be Conducted In-Plant?     Yes  No

    If Yes, Trainer's Name \_\_\_\_\_ DEC Trainer Number \_\_\_\_\_

5. Training Course Location \_\_\_\_\_

6. Name of Organization Providing Training \_\_\_\_\_

7. Contact Person or Trainer \_\_\_\_\_ Phone \_\_\_\_\_ Email: \_\_\_\_\_

8. Address \_\_\_\_\_

9. How does this training relate to operation, maintenance or management of a wastewater treatment plant?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. How is attendance monitored and verified? \_\_\_\_\_

11. Satisfactory program completion demonstrated by (check as appropriate)

Skill Demonstration     Report or Test     Other \_\_\_\_\_

12. Please attach:     Course Agenda, or a     Completed Course Time Line

**PLEASE SUBMIT A MINIMUM OF TWO WEEKS IN ADVANCE OF YOUR EVENT.**

RTC Number: _____	Course Date: _____
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<p><b><u>Return This Completed Form To:</u></b></p> <p>NYWEA 525 Plum Street Syracuse, NY 13204 Phone: (315) 422-7811 Fax: (315) 422-3851 mah@nywea.org</p>
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<p><b>For NYWEA Use Only</b></p> <p><b>Evaluated By:</b> _____</p> <p><b>Date:</b> _____</p> <p><b>Approved Contact Hours:</b> _____</p> <p><b>Course Approval Number:</b> _____</p>
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# Training Course Time Schedule

Day \_\_\_\_\_ Training Dates \_\_\_\_\_ Day \_\_\_\_\_

Time	Topic	Presenter	Time	Topic	Presenter
6:00			6:00		
6:15			6:15		
6:30			6:30		
6:45			6:45		
7:00			7:00		
7:15			7:15		
7:30			7:30		
7:45			7:45		
8:00			8:00		
8:15			8:15		
8:30			8:30		
8:45			8:45		
9:00			9:00		
9:15			9:15		
9:30			9:30		
9:45			9:45		
10:00			10:00		
10:15			10:15		
10:30			10:30		
10:45			10:45		
11:00			11:00		
11:15			11:15		
11:30			11:30		
11:45			11:45		
12:00			12:00		
12:15			12:15		
12:30			12:30		
12:45			12:45		
1:00			1:00		
1:15			1:15		
1:30			1:30		
1:45			1:45		
2:00			2:00		
2:15			2:15		
2:30			2:30		
2:45			2:45		
3:00			3:00		
3:15			3:15		
3:30			3:30		
3:45			3:45		
4:00			4:00		
4:15			4:15		
4:30			4:30		
4:45			4:45		
5:00			5:00		